Reg. No
 : 2305101098

 Name
 : MANISHA JI

 Age/Sex
 : 35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS

Reg. Date : 13-May-2023

Collected On : 13-May-2023 08:58 **Approved On** : 13-May-2023 09:57

Printed On : 29-May-2023 17:18

Result Unit Reference Interval

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval			
COMPLETE BLOOD COUNT (CBC) SPECIMEN: EDTA BLOOD						
Hemoglobin	11.5	g/dL	12.0 - 15.0			
RBC Count	4.00	million/cmm	3.8 - 4.8			
Hematrocrit (PCV)	32.0	%	40 - 54			
MCH	28.8	Pg	27 - 32			
MCV	80.0	fL	83 - 101			
MCHC	35.9	%	31.5 - 34.5			
RDW	12.6	%	11.5 - 14.5			
WBC Count	5350	/cmm	4000 - 11000			
DIFFERENTIAL WBC COUNT (Flow	cvtometry)					
Neutrophils (%)	66	%	38 - 70			
Lymphocytes (%)	26	%	20 - 40			
Monocytes (%)	06	%	2 - 8			
Eosinophils (%)	02	%	0 - 6			
Basophils (%)	00	%	0 - 2			
Neutrophils	3531	/cmm				
Lymphocytes	1391	/cmm				
Monocytes	321	/cmm				
Eosinophils	107	/cmm				
Basophils	0	/cmm				
Platelet Count (Flow cytometry)	244000	/cmm	150000 - 450000			
MPV	9.3	fL	7.5 - 11.5			
ERYTHROCYTE SEDIMENTATION	RATE					
ESR (After 1 hour)	09	mm/hr	0 - 21			
Modified Westergren Method						

----- End Of Report -----

Page 1 of 10

Oh

		TEST REPORT						
Reg. No	: 2305101098		Reg. Date	: 13-May-2023				
Name	: MANISHA JI		Collected On	: 13-May-2023 08:58				
Age/Sex	: 35 Years / Female		Approved On	: 13-May-2023 10:06				
Ref. By	:		Printed On	: 29-May-2023 17:18				
Client	: MEDIWHEEL WELLNESS							
<u>Paramete</u>	<u>r</u>	Result						
	BLOOD GROUP & RH Specimen: EDTA and Serum; Method: Haemagglutination							
ABO		'B'						
Rh (D)		Positive						
	-	End Of Report						



Reg. No : 2305101098 Name : MANISHA JI Age/Sex

: 35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date : 13-May-2023

Collected On : 13-May-2023 08:58 **Approved On** : 13-May-2023 10:27

Printed On : 29-May-2023 17:18

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval			
LIPID PROFILE						
Cholesterol (Enzymatic colorimetric)	141.4	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0			
Triglyceride (Enzymatic colorimetric)	99.8	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0			
VLDL	19.96	mg/dL	15 - 35			
Calculated						
LDL CHOLESTEROL	90.04	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: >190.0			
HDL Cholesterol	31.4	mg/dL	30 - 85			
Homogeneous enzymatic colorim	netric					
Cholesterol /HDL Ratio Calculated	4.50		0 - 5.0			
LDL / HDL RATIO Calculated	2.87		0 - 3.5			



: 2305101098 Reg. No Name MANISHA JI Age/Sex

35 Years / Female

Ref. By

Parameter

Client MEDIWHEEL WELLNESS Reg. Date : 13-May-2023

Collected On : 13-May-2023 08:58 Approved On : 13-May-2023 10:27

Printed On : 29-May-2023 17:18

<u>Unit</u> Reference Interval

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemasmicrosoft-com:office:office"/>

> LDL CHOLESTEROL **CHOLESTEROL HDL CHOLESTEROL TRIGLYCERIDES** Optimal<100 Desirable<200

Low<40 Normal<150 Near Optimal 100-129 Border Line 200-239 High >60 Border High 150-199 Borderline 130-159 High >240

High 200-499 High 160-189

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value

Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.

- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.

Result

LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.

KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

. All other responsibility will be of referring Laboratory.

----- End Of Report ------

This is an electronically authenticated report.

Page 4 of 10

Reg. No : 2305101098 Name : MANISHA JI Age/Sex : 35 Years / Female

Collected On : 13-May-2023 08:58 **Approved On**: 13-May-2023 10:27

: 13-May-2023

Ref. By

Printed On : 29-May-2023 17:18

Reg. Date

Client : MEDIWHEEL WELLNESS

Parameter Parame	Result	<u>Unit</u>	Reference Interval	
	LIVER FUN	ICTION TEST WIT	TH GGT	
Total Bilirubin	0.29	mg/dL	0.20 - 1.0	
Colorimetric diazo method				
Conjugated Bilirubin	0.08	mg/dL	0.0 - 0.3	
Sulph acid dpl/caff-benz				
Unconjugated Bilirubin	0.21	mg/dL	0.0 - 1.1	
Sulph acid dpl/caff-benz				
SGOT	13.3	U/L	0 - 31	
(Enzymatic)				
SGPT	15.5	U/L	0 - 31	
(Enzymatic)				
GGT	12.1	U/L	7 - 32	
(Enzymatic colorimetric)				
Alakaline Phosphatase	81.5	U/L	42 - 141	
(Colorimetric standardized method)				
Protien with ratio				
Total Protein	6.8	g/dL	6.5 - 8.7	
(Colorimetric standardized method)				
Albumin	4.2	mg/dL	3.5 - 4.94	
(Colorimetric standardized method)				
Globulin	2.60	g/dL	2.3 - 3.5	
Calculated				
A/G Ratio	1.62		0.8 - 2.0	
Calculated				

----- End Of Report -----

TEST REPORT

Reg. No : 2305101098 Name : MANISHA JI Age/Sex

: 35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date : 13-May-2023

Collected On : 13-May-2023 08:58 **Approved On** : 13-May-2023 10:27

Printed On : 29-May-2023 17:18

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	Reference Interval	
	KIDNEY FU	JNCTION TEST		
UREA (Urease & glutamate dehydrogenase)	13.4	mg/dL	10 - 50	
Creatinine (Jaffe method)	0.70	mg/dL	0.5 - 1.2	
Uric Acid (Enzymatic colorimetric)	2.7	mg/dL	2.5 - 7.0	

TEST REPORT

: 2305101098 Reg. No Name : MANISHA JI Age/Sex

35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date

: 13-May-2023

Collected On

: 13-May-2023 08:58

Approved On : 13-May-2023 10:27 **Printed On** : 29-May-2023 17:18

Parameter Result Unit Reference Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C Boronate Affinity with Fluorescent Quenching 6.3

% of Total Hb

Poor Control: > 7.0 % Good Control: 6.2-7.0 % Non-diabetic Level: 4.3-6.2 %

Mean Blood Glucose

146.98

mg/dL

Calculated **Degree of Glucose Control Normal Range:**

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

- * High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy,etc.
- * Some danger of hypoglycemic reaction in Type I diabetics.
- * Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION:-

Total haemoglobin A1 c is continuously symthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose oncentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days. HbA1c has been accepted as a measurnment which effects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

----- End Of Report -----

Page 7 of 10

DR PS RAO Approved by:



: 2305101098 Reg. No Name : MANISHA JI

Age/Sex : 35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date

: 13-May-2023

Collected On

: 13-May-2023 08:58

Approved On : 13-May-2023 10:27

Printed On : 29-May-2023 17:18

<u>Unit</u> Reference Interval **Parameter** Result

PLASMA GLUCOSE

Fasting Blood Sugar (FBS)

98.0

mg/dL

70 - 110

Hexokinase Method

Criteria for the diagnosis of diabetes 1. HbA1c >/= 6.5 *

Or 2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

Or

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

----- End Of Report -----

DR PS RAO MD Pathologist

Reg. No : 2305101098 Name MANISHA JI Age/Sex : 35 Years / Female

: 13-May-2023 Collected On : 13-May-2023 08:58

Reg. Date

Approved On : 13-May-2023 10:51

Ref. By Client

: MEDIWHEEL WELLNESS

Printed On

: 29-May-2023 17:18

Parameter Result <u>Unit</u> Reference Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity 20 cc

Pale Yellow Colour

Clear **Appearance**

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

5.0 - 8.0рН 6.0 1.015 1.002 - 1.03 Sp. Gravity

Nil Protein Nil Glucose Ketone Bodies Nil Urine Bile salt and Bile Pigment Nil Urine Bilirubin Nil Nitrite Nil Leucocytes Trace Blood Trace

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

Nil

Leucocytes (Pus Cells) 4 - 5/hpf Erythrocytes (Red Cells) 1 - 2/hpf 1-2/hpf **Epithelial Cells** Amorphous Material Nil Nil Casts Nil Crystals Bacteria Nil

----- End Of Report -----

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Monilia

DR PS RAO Approved by:



Reg. No : 2305101098 Name MANISHA JI Age/Sex : 35 Years / Female

: 13-May-2023

Collected On : 13-May-2023 08:58

Reg. Date

Approved On : 13-May-2023 10:28

Ref. By

Client

: MEDIWHEEL WELLNESS

Printed On : 29-May-2023 17:18

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval	
	THYRC	DID FUNCTION TE	ST	
T3 (Triiodothyronine)	1.12	ng/mL	0.87 - 1.78	
Chemiluminescence				
T4 (Thyroxine)	10.20	μg/dL	5.89 - 14.9	
Chemiluminescence				
TSH (ultra sensitive)	2.589	μIU/ml	0.34 - 5.6	
Chemiluminescence				

SUMMARY The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. LIMITATION Presence of autoantibodies may cause unexpected high value of TSH

----- End Of Report -----



: MEDIWHEEL WELLNESS

TEST REPORT

: 2305101098 Reg. Date Reg. No : 13-May-2023 Name MANISHA JI Collected On : 13-May-2023 08:58

Age/Sex : 35 Years / Female Approved On : 13-May-2023 09:57

Ref. By **Printed On** : 29-May-2023 17:18

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval				
	COMPLETE BLOOD COUNT (CBC)						
SPECIMEN: EDTA BLOOD							
Hemoglobin	11.5	g/dL	12.0 - 15.0				
RBC Count	4.00	million/cmm	3.8 - 4.8				
Hematrocrit (PCV)	32.0	%	40 - 54				
MCH	28.8	Pg	27 - 32				
MCV	80.0	fL	83 - 101				
MCHC	35.9	%	31.5 - 34.5				
RDW	12.6	%	11.5 - 14.5				
WBC Count	5350	/cmm	4000 - 11000				
DIFFERENTIAL WBC COUNT (Flow	DIFFERENTIAL WBC COUNT (Flow cytometry)						
Neutrophils (%)	66	%	38 - 70				
Lymphocytes (%)	26	%	20 - 40				
Monocytes (%)	06	%	2 - 8				
Eosinophils (%)	02	%	0 - 6				
Basophils (%)	00	%	0 - 2				
Neutrophils	3531	/cmm					
Lymphocytes	1391	/cmm					
Monocytes	321	/cmm					
Eosinophils	107	/cmm					
Basophils	0	/cmm					
Platelet Count (Flow cytometry)	244000	/cmm	150000 - 450000				
MPV	9.3	fL	7.5 - 11.5				
ERYTHROCYTE SEDIMENTATION F	RATE						
ESR (After 1 hour)	09	mm/hr	0 - 21				
Modified Westergren Method							

Modified Westergren Method

----- End Of Report -----

Page 1 of 10

Client





||||||||||||||||||||| TEST REPORT

 Reg. No
 : 2305101098
 Reg. Date
 : 13-May-2023

 Name
 : MANISHA JI
 Collected On
 : 13-May-2023 08:58

 Age/Sex
 : 35 Years / Female
 Approved On
 : 13-May-2023 10:06

 Ref. By
 : Printed On
 : 29-May-2023 17:18

Client : MEDIWHEEL WELLNESS

<u>Parameter</u> <u>Result</u>

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

ABO 'B'

Rh (D) Positive

----- End Of Report -----

Page 2 of 10

This is an electronically authenticated report.

Test done from collected sample

Approved by: DR PS RA

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



Reg. No : 2305101098 Reg. Date : 13-May-2023 Name MANISHA JI Collected On : 13-May-2023 08:58

Age/Sex : 35 Years / Female **Approved On**: 13-May-2023 10:27

Ref. By **Printed On** : 29-May-2023 17:18

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval
	LII	PID PROFILE	
Cholesterol (Enzymatic colorimetric)	141.4	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride (Enzymatic colorimetric)	99.8	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
VLDL	19.96	mg/dL	15 - 35
Calculated			
LDL CHOLESTEROL	90.04	mg/dL	Optimal: < 100.0 Near / above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: >190.0
HDL Cholesterol	31.4	mg/dL	30 - 85
Homogeneous enzymatic colo	rimetric		
Cholesterol /HDL Ratio Calculated	4.50		0 - 5.0
LDL / HDL RATIO Calculated	2.87		0 - 3.5



MEDIWHEEL WELLNESS

 Name
 : MANISHA JI
 Collected On
 : 13-May-2023 08:58

 Age/Sex
 : 35 Years / Female
 Approved On
 : 13-May-2023 10:27

Ref. By : **Printed On** : 29-May-2023 17:18

Parameter Result Unit Reference Interval

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemas-microsoft-com:office:office" />

LDL CHOLESTEROL CHOLESTEROL HDL CHOLESTEROL TRIGLYCERIDES Optimal<100

Desirable<200 Low<40 Normal<150 Near Optimal 100-129 Border Line 200-239 High >60 Border High 150-199 Borderline 130-159 High >240

> High 200-499 High 160-189

> > -

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value

Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.

- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- · LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.

KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

. All other responsibility will be of referring Laboratory.

----- End Of Report -----

Page 4 of 10

Client



: 2305101098 Reg. Date Reg. No : 13-May-2023 Name MANISHA JI Collected On : 13-May-2023 08:58

Age/Sex : 35 Years / Female Approved On : 13-May-2023 10:27

Ref. By **Printed On** : 29-May-2023 17:18

Client : MEDIWHEEL WELLNESS

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval			
LIVER FUNCTION TEST WITH GGT						
Total Bilirubin	0.29	mg/dL	0.20 - 1.0			
Colorimetric diazo method						
Conjugated Bilirubin	0.08	mg/dL	0.0 - 0.3			
Sulph acid dpl/caff-benz						
Unconjugated Bilirubin	0.21	mg/dL	0.0 - 1.1			
Sulph acid dpl/caff-benz						
SGOT	13.3	U/L	0 - 31			
(Enzymatic)						
SGPT	15.5	U/L	0 - 31			
(Enzymatic)						
GGT	12.1	U/L	7 - 32			
(Enzymatic colorimetric)						
Alakaline Phosphatase	81.5	U/L	42 - 141			
(Colorimetric standardized method)						
Protien with ratio						
Total Protein	6.8	g/dL	6.5 - 8.7			
(Colorimetric standardized method)						
Albumin	4.2	mg/dL	3.5 - 4.94			
(Colorimetric standardized method)						
Globulin	2.60	g/dL	2.3 - 3.5			
Calculated						
A/G Ratio	1.62		0.8 - 2.0			
Calculated						

----- End Of Report ------

Page 5 of 10



 Reg. No
 : 2305101098
 Reg. Date
 : 13-May-2023

 Name
 : MANISHA JI
 Collected On
 : 13-May-2023 08:58

 Age/Sex
 : 35 Years / Female
 Approved On
 : 13-May-2023 10:27

Ref. By : Printed On : 29-May-2023 17:18

Client : MEDIWHEEL WELLNESS

Percenter | P

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval	
	KIDNEY FUN	CTION TEST		
UREA (Urease & glutamate dehydrogenase)	13.4	mg/dL	10 - 50	
Creatinine (Jaffe method)	0.70	mg/dL	0.5 - 1.2	
Uric Acid (Enzymatic colorimetric)	2.7	mg/dL	2.5 - 7.0	

----- End Of Report -----



This is an electronically authenticated report.

Test done from collected sample

Approved by: DR PS RAO

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



 Name
 : MANISHA JI
 Collected On
 : 13-May-2023 08:58

 Age/Sex
 : 35 Years / Female
 Approved On
 : 13-May-2023 10:27

 Ref. By
 : Printed On
 : 29-May-2023 17:18

Client: MEDIWHEEL WELLNESS

Parameter Result Unit Reference Interval

HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C 6.3 % of Total Hb Poor Control : > 7.0 % Good Control : 6.2-7.0 %

Non-diabetic Level: 4.3-6.2 %

Mean Blood Glucose 146.98 mg/dL

Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

- * High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.
- * Some danger of hypoglycemic reaction in Type I diabetics.
- * Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION:-

*Total haemoglobin A1 c is continuously symthesised in the red blood cell throught its 120 days life span. The concentration of HBA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HBA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose oncentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurnment which effects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Errneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

----- End Of Report -----

Page 7 of 10

This is an electronically authenticated report.

Test done from collected sample

Jh-

Approved by: DR PS RAO MD Pathologis

MD Pathologist 2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



2305101098 Reg. No Name : MANISHA JI

Reg. Date : 13-May-2023 **Collected On** : 13-May-2023 08:58

Age/Sex 35 Years / Female

: 13-May-2023 10:27 **Approved On Printed On** : 29-May-2023 17:18

Ref. By

Parameter

Client : MEDIWHEEL WELLNESS

Reference Interval

PLASMA GLUCOSE

<u>Unit</u>

Fasting Blood Sugar (FBS)

98.0 mg/dL 70 - 110

Hexokinase Method

Criteria for the diagnosis of diabetes 1. HbA1c >/= 6.5 *

Or 2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

3. Two hour plasma glucose >/= 200mg/dL during an oral glucose tolerence test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

Or

Result

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >/= 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

----- End Of Report --

Page 8 of 10

This is an electronically authenticated report.

Test done from collected sample

Approved by:

2-B, Hazareshwar Colony, Udaipur 313001 (Raj.) , Mob.: 7229961115, 7229970005 (24 x 7 Customer Service) Email : kshipralabsudaipur@gmail.com



2305101098 Reg. Date Reg. No : 13-May-2023 Name MANISHA JI Collected On : 13-May-2023 08:58 : 35 Years / Female Age/Sex Approved On : 13-May-2023 10:51

Ref. By **Printed On** : 29-May-2023 17:18

Client MEDIWHEEL WELLNESS

Parameter Result **Unit** Reference Interval

URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Appearance

Quantity 20 cc Pale Yellow Colour Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

6.0 5.0 - 8.0pΗ 1.015 1.002 - 1.03 Sp. Gravity

Nil Protein Nil Glucose Ketone Bodies Nil Urine Bile salt and Bile Pigment Nil Urine Bilirubin Nil Nitrite Nil Trace Leucocytes Blood Trace

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

Leucocytes (Pus Cells) 4 - 5/hpf Erythrocytes (Red Cells) 1 - 2/hpf **Epithelial Cells** 1-2/hpf Nil Amorphous Material Casts Nil Nil Crystals Bacteria Nil Monilia Nil

----- End Of Report ------

Page 9 of 10





2305101098 Reg. No Name MANISHA JI Age/Sex : 35 Years / Female

Ref. By

Client : MEDIWHEEL WELLNESS Reg. Date : 13-May-2023

Collected On : 13-May-2023 08:58

Approved On : 13-May-2023 10:28

Printed On : 29-May-2023 17:18

<u>Parameter</u>	Result	<u>Unit</u>	Reference Interval	
	THYRO	ID FUNCTION TE	ST	
T3 (Triiodothyronine)	1.12	ng/mL	0.87 - 1.78	
Chemiluminescence				
T4 (Thyroxine)	10.20	μg/dL	5.89 - 14.9	
Chemiluminescence				
TSH (ultra sensitive)	2.589	μlU/ml	0.34 - 5.6	
Chemiluminescence				

SUMMARY The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. LIMITATION Presence of autoantibodies may cause unexpected high value of TSH



Page 10 of 10